

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 31, 2007 08:00 AM
Secretary of State

DOCUMENT # L05000035005

1. Entity Name
M&A HOMES, LLC



Principal Place of Business
7232 JOHN SILVER LANE
SARASOTA, FL 34231

Mailing Address
7232 JOHN SILVER LANE
SARASOTA, FL 34231



01252007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-2735742	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MURPHY, GAIL R
7232 JOHN SILVER LANE
SARASOTA, FL 34231

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	MURPHY, GAIL R
STREET ADDRESS	7232 JOHN SILVER LANE
CITY- ST- ZIP	SARASOTA, FL 34231

TITLE	MGRM
NAME	ANDREU, KENNETH
STREET ADDRESS	3244 KENMORE DR
CITY- ST- ZIP	SARASOTA, FL 34231

TITLE	
NAME	
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CITY- ST- ZIP	

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CITY- ST- ZIP	

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**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

1-27-07 9419211244